



NORTH AMERICAN VAN LINES BILL OF LADING & FREIGHT BILL

U.S. DOT NO. 070851 • NORTH AMERICAN VAN LINES, INC. • P.O. BOX 988, FORT WAYNE, IN 46801-0988 • PHONE (800) 348-2111

WHEN INQUIRING ABOUT YOUR SHIPMENT—REFER TO:
REGISTRATION NUMBER
735168000000

SHIPPER (PERSON OR COMPANY PAYING CHARGES) A/C (OWNER OF GOODS—MAY BE THE SAME) LOADING ADDRESS CITY STATE SPLC		CONSIGNEE DELIVERY ADDRESS CITY SPLC NOTIFY ADDRESS CITY	
43 WINTERBERRY COURT COCKEYSVILLE MD 21030 232301000 BALTIMORE (PHONE) 248/506-2138		W/A 2635 Hagelich Dr SAGINAW MI 48601 316100000 SAGINAW (PHONE) 123/123-1234	
BILL TO: ACCOUNT PROFILE NO. ACCT: INDIV <input type="checkbox"/> O <input type="checkbox"/> NAT'L <input type="checkbox"/> N <input type="checkbox"/> MILITARY <input type="checkbox"/> M <input type="checkbox"/> GOVT <input type="checkbox"/> G <input type="checkbox"/> OTHER <input type="checkbox"/> PROVISIO 1 ISSUING AGENT CODE 15660 LOADING PERIOD 0603-060313 & DELIVERY PERIOD 0607-061713		MID MICHIGAN MOVING (PHONE) 989/772-2824 2374 PARKWAY DR MOUNT PLEASANT MI 48858	

SUBJECT TO THE FOLLOWING CHARGES AND CONDITIONS:

1. BASED ON TARIFF NO. 400-N
2. ☐ PREPAID ☐ C.O.D. ☐ CHARGE ☐ CASHIER'S CHECK ☐ CASH ☐ CREDIT CARD
3. STORAGE: ☐ IN TRANSIT ☐ OR ☐ PERMANENT ☐ WAREHOUSE CONTROL NUMBER
AT IN SIT OUT SIT

CODE	NAME	NORTH AMERICAN SERVICING AGENTS	SPECIAL SERVICES AUTHORIZED BY SHIPPER	SHIPMENT WEIGHT
BKR	15660 THE MOVING CONNECTION		EXPEDITED SERVICE ORDERED BY SHIPPER—	GROSS WEIGHT _____ LB.
O/A	15660 THE MOVING CONNECTION		DELIVERY ON OR BEFORE _____	TARE WEIGHT _____ LB.
PKR	10888 MID MICHIGAN MOVING & STG		EXCLUSIVE USE OF A _____ CU. FT. VE.—ORDERED.	NET WT. _____ LB.*
D/A			SPACE RESERVATION _____ CU. FT. ORDERED	
UNPKR		DRIVER CODE	INTERLINE CARRIER NAME: _____	MOVING AS _____ LB.*
RULE 19 AGENT	CONTROL #	MILES	ADDRESS: _____	GROSS WT. _____ LB.
1 HAULER			ADVANCE NOTIFICATION OF CHARGES TO: _____	TARE WT. _____ LB.
2 HLR			FAX/E-MAIL/TEL _____	NET WT. _____ LB.*
3 HLR			OTHER(EXPLAIN) _____	

FOR CALIFORNIA ORIGINS: Customer agrees that title to all packing materials and other property sold to customer passes to customer prior to the transportation of such property to the customer by carrier. The sale price of the containers and container material is \$ _____. This sale price is included in the total packing service charge.

SHIPMENT REWEIGH	AGENT NO.	SERVICES PERFORMED	RATE	CHARGES
<input type="checkbox"/> SHIPPER REQUESTS REWEIGH, AND <input type="checkbox"/> SHIPPER WAIVES THE RIGHT TO OBSERVE		TRANSPORTATION MILEAGE *TOTAL WT.		
		BASE WGT. LBS. BASE TRANS. CHARGE \$		
		EXCESS WGT. LBS. @ /CWT = \$	TOTAL	
SHIPPER'S SIGNATURE X _____ DATE: _____		VALUATION MVP-AMT. \$ 0.50		
		DAILY: (WT. _____ LB.) 1st Day @ _____ + No./Days @ _____		
		WAREHOUSE HANDLING _____ LB.		
		VALUATION _____ 15 Day period(s) @ _____		
		CARTAGE ORIG. DEST. MILES SEC. ()		
		BASE WGT. LBS. BASE CARTAGE CHARGE \$		
		EXCESS WGT. LBS. @ /CWT = \$	TOTAL	
		OTHER (EXPLAIN) P.B.P.P. 1 3,000.00		
		TOTAL PRICE GUARANTEE		

LOADING CONFIRMATION		EXTRA <input type="checkbox"/> PICK-UPS OR <input type="checkbox"/> DELIVERIES PER STOP		FS <input type="checkbox"/> CS <input type="checkbox"/> PACKING
SUBJECT TO CARRIER APPLICABLE TARIFFS AND ALL TERMS AND CONDITIONS SHOWN HEREON AND ON THE REVERSE SIDE OF THIS CONTRACT.		EXTRA STOP ZIPS: (1) (2)		FS <input type="checkbox"/> CS <input type="checkbox"/> UNPACKING
DATE LOADED: 6-4-13		(3) 3,000.00		CONTAINER CHARGE
CUSTOMER SIGNATURE X _____		ESTIMATED CHARGES: \$		ADDITIONAL SERVICES
DRIVER SIGNATURE X _____ CODE: 28821		(IF THE SHIPMENT IS COLLECT-ON-DELIVERY) THE MAXIMUM AMOUNT CARRIER WILL DEMAND AT THE TIME OF DELIVERY, TO BE PAID AS SET FORTH ABOVE (110% OF NON-BINDING ESTIMATE; 100% OF BINDING ESTIMATE) IS: \$		TOTAL
		ANY BALANCE DUE WILL BE BILLED 30 DAYS AFTER DELIVERY.		PRE-PAYMENT RECEIVED DEST. PAYMENT RECEIVED BALANCE DUE
DELIVERY CONFIRMATION		REFUND DUE SHIPPER BY NAVL BY AGENT (CODE)		\$ 1500 \$ \$
THE ABOVE DESCRIBED SHIPMENT RECEIVED IN APPARENT GOOD CONDITION, EXCEPT AS NOTED ON THE INVENTORY AND CONDITION REPORT.		BY: X (CASH REFUND RECEIVED) \$		STATEMENT OF ADDITIONAL SERVICES ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
ACTUAL DELIVERY DATE: _____				
CUSTOMER SIGNATURE X _____				
DRIVER SIGNATURE X _____ CODE: _____				

\$1500 remaining balance Due @ del by cert check.



BOL

THE CONSUMER MUST SELECT ONE OF THESE OPTIONS FOR THE CARRIER'S LIABILITY FOR LOSS OR DAMAGE
TO YOUR HOUSEHOLD GOODS

THIS IS A TARIFF LEVEL OF CARRIER LIABILITY - IT IS NOT INSURANCE

Option 1 - Standard Full Value Protection*

The Cost Estimate that you receive from your mover **MUST INCLUDE** Full (Replacement) Value Protection for the articles that are included in your shipment. If you wish to waive the Full (Replacement) Level of protection, you must complete the **WAIVER of Full (Replacement) Value Protection** shown below.

Full (Replacement) Value Protection is the most comprehensive plan available for protection of your goods. If any article is lost, destroyed, or damaged while in your mover's custody, your mover will, at its option, either: 1) repair the article to the extent necessary to restore it to the same condition as when it was received by your mover, or pay you for the cost of such repairs; or 2) replace the article with an article of like kind and quality, or pay you for the cost of such a replacement. Under Full (Replacement) Value Protection, if you do not declare a higher replacement value on this form prior to the time of shipment, the value of your goods will be deemed to be equal to \$6.00 multiplied by the weight (in pounds) of the shipment, subject to a minimum valuation for the shipment of \$6,000. Under this option, the cost of your move will be composed of a base rate plus an added cost reflecting the cost of providing this full value cargo liability protection for your shipment.

If you wish to declare a higher value for your shipment than these default amounts, you must indicate that value here. Declaring a higher value may increase the valuation charge in your cost estimate.

The Total Value of my shipment is: \$ _____ (to be provided by the customer). Dollar Estimate of the cost of your move at Full (Replacement) Value Protection: \$ _____ (to be provided by carrier).

Deductibles - You may also select one of the following deductible amounts under the Full (Replacement) Value level of liability that will apply for your shipment. (If you do not make a selection, the "No Deductible" level of full value protection that is included in your cost estimate will apply):

\$250 Deductible (_____) (Customer Initials) OR \$500 Deductible (_____) (Customer Initials)

Dollar Estimate of the cost of your move with \$ _____ Deductible: \$ _____ (to be provided by carrier)

I acknowledge that for my shipment I have: 1) **ACCEPTED** the Full (Replacement) Level of protection included in the estimate of charges and declared a higher Total Value of my shipment (if appropriate); and 2) received a copy of the "Your Rights and Responsibilities When You Move" brochure explaining these provisions.

Customer's Signature: _____ Date: _____

Declaration of Article(s) of Extraordinary (Unusual) Value - I acknowledge that I have prepared and retained a copy of the "Inventory of Items Valued in Excess of \$100 Per Pound per Article" that are included in my shipment and that I have given a copy of this Inventory to the mover's representative. I also acknowledge that the mover's liability for loss of or damage to any article valued in excess of \$100 per pound will be limited to \$100 per pound for each pound of such lost or damaged article(s) (based on actual article weight), not to exceed the declared value of the entire shipment, unless I have specifically identified such articles for which a claim for loss or damage may be made on the attached inventory.

Customer's Signature: _____ Date: 6/9/2013

Option 2 - Waiver of Full Replacement Value Protection

This lower level of protection is provided at no additional cost beyond the base rate; however, it provides only minimal protection that is considerably less than the average value of household goods. Under this option, a claim for any article that may be lost, destroyed, or damaged while in your mover's custody will be settled based on the weight of the individual article multiplied by 60 cents. For example, the settlement for an audio component valued at \$1,000 that weighs 10 pounds would be \$6.00 (10 pounds times 60 cents).

Dollar Estimate of the cost of your move under the 60-cents option: \$ 60 cents (to be provided by carrier)

COMPLETE THIS PART ONLY if you wish to **WAIVE** the Full (Replacement) Level of Protection included in the higher cost estimate provided (above) for your shipment and instead select the **LOWER Released Value of 60 Cents per Pound per Article**; to do so you must initial and sign on the lines below.

I wish to Release My Shipment to a Maximum Value of 60 Cents per Pound per Article: (_____) (Customer Initials)

I acknowledge that for my shipment I have: 1) **WAIVED** the Full (Replacement) Level of protection for which I have received an estimate of charges; and 2) received a copy of the "Your Rights and Responsibilities When You Move" brochure explaining these provisions.

Customer's Signature: _____ Date: 6/9/2013



DOV

*Referred to by North American Van Lines as "Maximum Value Protection Plan".

U.S. DOT NO 070851 • NORTH AMERICAN VAN LINES, INC. • P.O. BOX 988, FORT WAYNE, IN 46801-0988 • (800) 348-2111

Registration #

735168

Customer Name

Calice Tony

HIGH VALUE INVENTORY**INVENTORY OF ITEMS WITH VALUES IN EXCESS OF \$100.00 PER POUND PER ARTICLE****STATEMENT OF CUSTOMER RESPONSIBILITIES**

All items included in your shipment that are considered to be of extraordinary (unusual) value must be specifically identified and the carrier must be advised that they are included in the shipment. Items of extraordinary value are defined as those items having a value greater than \$100.00 per pound. Typical household items frequently having a value in excess of \$100.00 per pound per article are: Antiques, China, Crystal, Figurines, Furs, Objects of Art, Oriental Rugs, Silverware, and Tapestries. Other items may also fall into this category and must be identified as well.

THE PURPOSE OF THIS INVENTORY IS TO ASSIST YOU IN IDENTIFYING ARTICLES OF EXTRAORDINARY OR UNUSUAL VALUE IN ORDER THAT THE CARRIER WILL BE AWARE OF THOSE ITEMS WHICH REQUIRE SPECIAL HANDLING AND PROTECTION. FAILURE TO IDENTIFY SUCH ARTICLES WILL RESULT IN LIMITED CARRIER LIABILITY.

INV #	Description of Articles Exceeding \$100.00 Per Pound Per Article	Condition of Item	Estimated Value

I HAVE NO HIGH VALUE ITEMS IN MY SHIPMENT

Customer Initials

IMPORTANT NOTICE: The following items must not be included in the shipment and will not be covered by the carrier's possession protection plan: jewelry, coins, currency, other negotiable paper (e.g. stock certificates, bonds, etc.), important personal documents (e.g. deeds, titles, tax papers, birth certificates, etc.) and collections (e.g. stamps, baseball cards, etc.)

Owner (customer) agrees that any claim for loss or damage must be supported by proof of value and understands settlement will be subject to the declaration of the value contained on the accompanying Bill of Lading, the Bill of Lading terms and conditions, the Tariff in effect at the time of the shipment, the Household Goods Descriptive Inventory and all other pertinent information available to the carrier. If you have not listed articles having a value in excess of \$100.00 per pound per article on this inventory, your signature below attests to the fact that such articles are not included in your shipment. Customer acknowledges that the carrier's liability for loss or damage to any article not listed, that is valued in excess of \$100.00 per pound will be limited to \$100.00 per pound for each pound of such lost or damaged article (based on the actual article weight), not to exceed the declared value of the entire shipment, unless customer has specifically identified such articles for which a claim for loss or damage is made on this inventory. **NOTE: It is the customer's responsibility to acknowledge any damaged or missing items at time of delivery by documenting such occurrences on the item check-off sheet and/or inventory forms.**

AT ORIGIN:

I certify the above listed information to be true, correct, and complete.

Carrier's representative acknowledges receipt of executed copy of this inventory.

Customer:

Signature

Date

Carrier's Representative:

Signature

Code

Date



HOUSEHOLD GOODS DESCRIPTIVE INVENTORY

PART, EXACT DAMAGE, AT LOCATION										Driver or Agent #	Page # <u>1</u>	# of Pages <u>3</u>																																																																							
										Customer Name	<u>Calice Tony</u>		Registration #	<u>735168</u>																																																																					
										Origin City, State	<u>Cockeysville, MD</u>		Tag Color																																																																						
										Destination City, State	<u>Saginaw, MI</u>		GBL #																																																																						
										<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="5">PART & LOCATION</th> <th colspan="5">EXACT DAMAGE</th> <th colspan="5">DESCRIPTIVE SYMBOLS</th> </tr> <tr> <td>1 Arm</td><td>10 Top</td><td>BE Bent</td><td>RU Rusted</td><td>CD Carrier Disassembled</td> <td>2 Bottom</td><td>11 Veneer</td><td>BR Broken</td><td>SC Scratched</td><td>CP Carrier Packed</td> <td>3 Corner</td><td>12 Edge</td><td>BU Burned</td><td>SH Short</td><td>CU Contents and Condition Unknown</td> </tr> <tr> <td>4 Front</td><td>13 Center</td><td>CH Chipped</td><td>SO Soiled</td><td>DBO Disassembled By Owner</td> <td>5 Left</td><td>14 Seat</td><td>D Dented</td><td>S Stretched</td><td>MCU Mechanical Condition Unknown</td> <td>6 Leg</td><td>15 Drawer</td><td>F Faded</td><td>T Torn</td><td>PB Professional Books</td> </tr> <tr> <td>7 Rear</td><td>16 Inside</td><td>G Gouged</td><td>W Worn</td><td>PBO Packed By Owner</td> <td>8 Right</td><td>17 Door</td><td>L Loose</td><td>WP Warped</td><td>PE Professional Equipment</td> <td>9 Side</td><td>18 Shelf</td><td>M Marred</td><td>WWS Water-stained</td><td>PP Professional Papers</td> </tr> <tr> <td></td><td>19 Hardware</td><td>MI Mildew</td><td>WT Wet</td><td>(SW) Shrink Wrap</td> <td></td><td></td><td>R Rubbed</td><td>Z Cracked</td> <td></td><td></td><td></td><td></td><td></td> </tr> </table>										PART & LOCATION					EXACT DAMAGE					DESCRIPTIVE SYMBOLS					1 Arm	10 Top	BE Bent	RU Rusted	CD Carrier Disassembled	2 Bottom	11 Veneer	BR Broken	SC Scratched	CP Carrier Packed	3 Corner	12 Edge	BU Burned	SH Short	CU Contents and Condition Unknown	4 Front	13 Center	CH Chipped	SO Soiled	DBO Disassembled By Owner	5 Left	14 Seat	D Dented	S Stretched	MCU Mechanical Condition Unknown	6 Leg	15 Drawer	F Faded	T Torn	PB Professional Books	7 Rear	16 Inside	G Gouged	W Worn	PBO Packed By Owner	8 Right	17 Door	L Loose	WP Warped	PE Professional Equipment	9 Side	18 Shelf	M Marred	WWS Water-stained	PP Professional Papers		19 Hardware	MI Mildew	WT Wet
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ITEM #	CR	ARTICLE	ROOM	CONDITION AT ORIGIN	EXCEPTIONS AT DESTINATION
01		China Cabinet		6" CH-SC. 4 SC-CH Right	
2				Spot on left Glass Door Panel.	
3		TV Cabinet		5-9, 8-9, 4, SC-R-M. 10-SC-R.	
4				Circle Stains on 10	
5		DR. Chair		6, 3, 12 D-CH-SC 7-R 1450	
6		DR. Chair		6, 3, 12 D-CH-SC 7-R 1450	
7		DR. Chair		6, 3, 12 D-CH-SC 7-R 1450	
8		DR. Chair		6, 3, 12 SER-D 7-R 1450	
9		DR. Table		6, 3, 12 D-CH-SC-CH 10 R-SC.	
10				Edges D-CH-G	
11		DR. Table Pad		on 2 ear W-R 10, 3, 12.	
12		Love Seat Sofa		sof cloth.	
13		O.S. Arm chair		6, D-CH-SC. 80-1, 7, 6, 14, 4	
14		Table Left		3, 12 D-CH 10, 4, 7 SC-R-M	
15		Table Left		3, 12 D-CH 10, 4, 7 SC-R-M	
16		Arm chair		6, R-M-SC 1" Loose NO SENT Attached	
17		Arm chair		6, R-M-SC 1" Loose NO SENT	
18		Arm chair		6, R-M-SC 1" Loose NO SENT	
19		Arm chair		6, R-M-SC 1" Loose NO SENT	
20		Table STAND.		10-R-M-SC 6, D-CH.	
21		Bed slats on 3ea.		Unfinished.	
22		Bed Side Rails on 2ea.		D-CH-SC. All over.	
23		4x6 Head board..		746 3, 12 D-CH-SC.	
24		TOTE		PB0 w.	
25		TOTE		PB0 w.	
26		TOTE		PB0 w.	
27		TOTE		PB0 w.	
28		4.5 CTN		PB0 w.	
29		Lg. TOTE		PB0 w.	
30		Lg. TOTE		PB0 w. Crushed In	

Remarks:

IMPORTANT NOTICE: Before signing -- check shipment, count items, and describe loss or damage in space on the right above. If for any reason you were not given the opportunity to inspect this shipment, you should call this toll free number, 800-348-3746.

I have checked all the items listed and numbered on this page inclusive, and acknowledge that this is a true and complete list of the goods tendered, and of the state of the goods received.



INV

AT ORIGIN	Driver <u>Thayer Johnson</u>	Code <u>28821</u>	Date <u>6-4-13</u>	AT DESTINATION	Driver	Code	Date
	Customer		Date		Customer		Date

			5,7	7,13	8,7			
			5,13	13	8,13			
			5,4	4,13	8,4			
7,10	10,13	4,10	10,5	10,13	10,8	4,10	10,13	10,7
7,13	13	4,13	5,13	13	8,13	4,13	13	7,13
7,2	2,13	4,2	2,5	2,13	2,8	4,2	2,13	2,7
			5,4	4,13	8,4			
			5,13	13	8,13			
			5,7	7,13	8,7			

CD	Carrier Disassembled
CP	Carrier Packed
CU	Contents and Condition Unknown
DBO	Disassembled By Owner
MCU	Mechanical Condition Unknown
PB	Professional Books
PBO	Packed By Owner
PE	Professional Equipment
PP	Professional Papers
SW	Shrink Wrap

of Pages 3

Registration # 735 168

Tag Color	Lot #
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GBL #	
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ITEM #	CR	ARTICLE	ROOM	CONDITION AT ORIGIN	EXCEPTIONS AT DESTINATION
31		1.5 CTN		PBD, un.	
2		6.1 CTN		PBD un. Crushed.	
3		Plastic TOTE		PBD un.	
4		4x6 MATHRESS		CP	
5		4x6 MATHRESS		CP	
36		4x6 Boxspring		Soil All over Badly on End	
7		4x6 Boxspring		Soil All over. Badly on End.	
8		Table. (Round Top)		106-D MATHRESS 6, 3, 12 DASH	
9		Hamlet Nest			
40		TOTE		PBD un.	
1		3.0 CTN		PBD un. Crushed in Top.	
2		TOTE		PBD un.	
3		1.5 CTN		PBD un.	
4		1.5 CTN		PBD un.	
5		1.5 CTN		PBD un.	
6		1.5 CTN		PBD un.	
7		1.5 CTN		PBD un.	
8		1.5 CTN		PBD un.	
9		1.5 CTN		PBD un.	
50		1.5 CTN		PBD un.	
1		3.0 CTN		PBD un.	
2		4.5 CTN		PBD un.	
3		5.2 CTN		PBD un.	
4		Lg. TOTE		PBD un.	
5		3.0 CTN		PBD un.	
6		3.0 CTN		PBD un.	
7		3.0 CTN		PBD un.	
8		3.0 CTN		PBD un.	
9		6.1 CTN		PBD un.	
60		6.1 CTN		PBD un.	

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I have checked all the items listed and numbered on this page inclusive, and acknowledge that this is a true and complete list of the goods tendered, and of the state of the goods received.



INV

AT ORIGIN	Driver	<i>James Johnson</i>	Code	<i>28821</i>	Date	<i>6-4-13</i>	AT DEST- INATION	Driver		Code		Date	
	Customer	<i>John Callahan</i>			Date			Customer					Date

HOUSEHOLD GOODS DESCRIPTIVE INVENTORY

PART, EXACT DAMAGE, AT LOCATION										Driver or Agent #		Page <u>3</u>		# of Pages <u>3</u>																																																																																													
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1 Arm	10 Top	BE Bent	RU Rusted	CD Carrier Disassembled																																																																																																							
2 Bottom	11 Veneer	BR Broken	SC Scratched	CP Carrier Packed																																																																																																							
3 Corner	12 Edge	BU Burned	SH Short	CU Contents and Condition Unknown																																																																																																							
4 Front	13 Center	CH Chipped	SO Soiled	DBO Disassembled By Owner																																																																																																							
5 Left	14 Seat	D Dented	S Stretched	MCU Mechanical Condition Unknown																																																																																																							
6 Leg	15 Drawer	F Faded	T Torn	PB Professional Books																																																																																																							
7 Rear	16 Inside	G Gouged	W Worn	PBO Packed By Owner																																																																																																							
8 Right	17 Door	L Loose	WP Warped	PE Professional Equipment																																																																																																							
9 Side	18 Shelf	M Marred	<u>WS</u> Water-stained	PP Professional Papers																																																																																																							
	19 Hardware	MI Mildew	<u>WT</u> Wet	<u>SW</u> Shrink Wrap																																																																																																							
		Z Rubbed	Z Cracked																																																																																																								

[illegible]

Remarks: _____

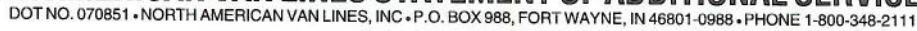
IMPORTANT NOTICE: Before signing -- check shipment, count items, and describe loss or damage in space on the right above. If for any reason you were not given the opportunity to inspect this shipment, you should call this toll free number, 800-348-3746.

I have checked all the items listed and numbered on this page inclusive, and acknowledge that this is a true and complete list of the goods tendered, and of the state of the goods received.



INV

AT ORIGIN	Driver	Code	Date	AT DEST- INATION	Driver	Code	Date
	Customer		Date		Customer		Date



NO

AGENT CODE	#
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SAS